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\*\* CONTINUING DATA \*\*\*\*\* *if*

This application is a CIP of 09/577,147 05/24/2000 PAT 6,372,234  
 which is a CIP of 09/448,600 11/24/1999 PAT 6,183,762  
 which is a CIP of 09/084,777 05/27/1998 PAT 6,146,645  
 which claims benefit of 60/047,753 05/27/1997  
 and claims benefit of 60/047,779 05/28/1997  
 and claims benefit of 60/075,863 02/25/1998  
 and claims benefit of 60/075,864 02/25/1998

\*\* FOREIGN APPLICATIONS \*\*\*\*\* *g*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

\*\* 07/27/2001

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR	SHEETS	TOTAL	INDEPENDENT
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	COUNTRY	DRAWING	CLAIMS	CLAIMS
Verified and Acknowledged	CANADA	30	24	3
Examiner's Signature <i>[Signature]</i> Initials <i>CS</i>				

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